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To:

Division of Corporations

Fax Number

: (850)205-0383

CORPORATION 05 AUG -9 AM 11: 24

Account Name

: A.B.S. OF JACKSONVILLE, INC.

Account Number : 120010000215 Phone : (904)777-1533 Fax Number : (904)777-1717

LIMITED LIABILITY COMPANY

VYTIS, LLC

Certificate of Status	1
Certified Copy	0
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Estimated Charge	\$130.00

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ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED A 9 55

SECRETARY OF STATE TALLAHASSEE, FLORIDA

ARTICLE I. NAME:

The name of the Limited Liability Company is: VYTIS, LLC

ARTICLE II. ADDRESS:

The mailing address and street address of the principal office of the Limited Liability Company is:

4379 Sidewinder Trail Middleburg, FL 32068

ARTICLE III. REGISTERED AGENT, REGISTERED OFFICE, & REGISTERED AGENT'S SIGNATURE:

The name and Florida street address of the registered agent are: Adrian Masiulis, MGR. 4379 Sidewinder Trail Middleburg, FL 32068

Having been named as registered agent and to accept service of process for the above stated limited liability company at the place of designated in this certificate, I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relating to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, Florida Statutes.

Adrian Masiulis/Registered Agent

Date

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ARTICLE IV. MANAGER(S) OR MANAGING MEMBER(S):

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The name(s) and address(es) of each Manager or Managing Member is as follows AHASSEE. FLORIDA

Title: MGR.

Name and Address: Adrian Masiulis 4379 Sidewinder Trail Middleburg, FL 32068

REQUIRED SIGNATURE:

IN WITNESS WHEREOF, the undersigned member(s) has executed these Articles of Organization, this ______, day of Avoust ______, 2005.

(in accordance with section 608.408(3), Florida Statutes, the execution of this document constitutes an affirmation under penalties of perjury that the facts stated herein are true.)